



BOURNE URBAN DISTRICT COUNCIL

ANNUAL REPORT

OF THE

MEDICAL OFFICER OF HEALTH

AND THE

PUBLIC HEALTH INSPECTOR

FOR THE YEAR 1968

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ANNUAL REPORT OF THE MEDICAL OFFICER OF HEALTH
FOR THE YEAR 1968

To the Chairman and Members of
the Bourne Urban District Council.

Mr. Chairman, Ladies and Gentlemen,

I have the honour to present to you my fourteenth Annual Report of the Vital Statistics, Health and Sanitary Conditions of the Urban District.

STATISTICS AND SOCIAL CONDITIONS

Area in acres	10,103
Population - Census 1961	5,339
Population - Registrar General's Estimate 1968	5,790
Number of Inhabited Houses	2,048
Rateable Value	£178,434
Sum represented by a 1d rate	£685

VITAL STATISTICS

Extract from Vital Statistics for the year 1968.

Birth and Death Rates

As the age and sex distribution of the population in different areas materially affects both the birth and death rates of these areas, comparability factors allowing for this are issued by the Registrar for each Local Government Unit. These factors may be used for calculating what are termed in this Report as 'NET' rates and fair comparisons are obtained if the latter are used when comparing rates with those of any other area (when these have been similarly adjusted) or with the rates for the Country as a whole.

These factors for Births and Deaths in respect of Bourne are 1.00 and 0.93 respectively. The corresponding figure when multiplied by the crude rate (that is for Births or Deaths as the case may be) will give the net rate. In this way adjustments are made for Boundary Changes and also account is taken of the presence of any residential institutions within the area.

	<u>MALE</u>	<u>FEMALE</u>	<u>TOTAL</u>
Live births	34	47	81
Legitimate	32	42	74
Illegitimate	2	5	7
Crude live birth rate per 1,000 of estimated population			14.0
Net live birth rate per 1,000 of estimated population			14.0
Rate for England and Wales			16.9
Illegitimate live births per cent of total live births			8.6

Still births	-	-	-
Legitimate	-	-	-
Illegitimate	-	-	-
Still birth rate per 1,000 live and still births			NIL
Rate for England and Wales			14.8
Total live and still births			81

	<u>MALE</u>	<u>FEMALE</u>	<u>TOTAL</u>
Deaths	34	39	73
Crude death rate per 1,000 estimated population			12.6
Net death rate per 1,000 of estimated population			11.7
Rate for England and Wales			11.9

Infantile Mortality (i.e. deaths of infants under the age of one year)

	<u>MALE</u>	<u>FEMALE</u>	<u>TOTAL</u>
Total number of deaths	-	-	-
Legitimate	-	-	-
Illegitimate	-	-	-
Infantile mortality rate per 1,000 live births			NIL
Rate for England and Wales			18.0
Legitimate infant deaths per 1,000 live births			NIL
Illegitimate infant deaths per 1,000 illegitimate live births			NIL

Neo-natal deaths i.e. deaths of infants under 4 weeks of age)	<u>MALE</u>	<u>FEMALE</u>	<u>TOTAL</u>
Neo-natal mortality rate over 1,000 live births	-	-	NIL
Rate for England and Wales			12.3

	<u>MALE</u>	<u>FEMALE</u>	<u>TOTAL</u>
Early neo-natal deaths i.e. deaths of infants under one week	-	-	NIL

	<u>MALE</u>	<u>FEMALE</u>	<u>TOTAL</u>
Early neo-natal mortality rate per 1,000 live births	-	-	NIL
Rate for England and Wales			10.5
Perinatal mortality rate (i.e. still-births and deaths under one week combined) per 1,000 live and still births			NIL
Rate for England and Wales			25.0
Maternal mortality (i.e. death due to pregnancy and childbirth or abortion)			NIL
Rate for England and Wales			0.25

The Birth Rate at 14.0 was lower than the National figure of 16.9 and this was the fourth successive year in which this has occurred. The National figure also of recent years has been showing a slight downward trend. The illegitimate birth percentage at 8.6 is too high for complacency.

The Death Rate of 11.7 was very close to that of England and Wales as a whole but this was only arrived at after using the Comparability Factor though the alteration in it this year from 0.82 to 0.93 indicates that our population is becoming of a more even composition than for many years past.

The Natural Increase, that is excess of live births over deaths, was eight. This was down on the two previous years so the overall increase in population is due to influx from the surrounding areas - mainly Peterborough.

The figure for Infantile Mortality in England and Wales this year was 18.0 per thousand live births and this is the lowest figure ever recorded in this Country. It is worth reflecting that even as recently as the immediate post war years the National figure was 34.0. This is a true indication of the skill and care which are given to the Expectant Mother and her Child and also of the competence of the mothers themselves.

Bourne has again excelled in not having a single infant death under one year of age and this is for the second year in succession.

Due to the comparatively small numbers involved it would be unwise to read too much into local figures, as an alteration of only one in these can make a very big difference to the overall rate.

CAUSES OF DEATH

Cause of Death	Sex	Total All Ages	Age in Years						
			1-	5-	35-	45-	55-	65-	75 and over
Malignant Neoplasm - Stomach	F	1	-	-	-	1	-	-	-
Malignant Neoplasm - Lung, Bronchus	M	3	-	-	-	-	-	2	1
Malignant Neoplasm - Breast	F	2	-	-	-	1	1	-	-
Other Malignant Neoplasms, etc.	M	3	1	-	-	-	-	-	2
	F	4	-	-	1	-	-	2	1
Other Diseases of Nervous System, etc.	F	1	1	-	-	-	-	-	-
Hypertensive Disease	M	1	-	-	-	1	-	-	-
Ischaemic Heart Disease	M	9	-	-	-	1	-	1	7
	F	8	-	-	-	-	1	1	6
Other Forms of Heart Disease	M	6	-	-	-	-	-	1	5
	F	10	-	-	-	-	-	1	9
Cerebrovascular Disease	M	3	-	-	-	-	-	2	1
	F	2	-	-	-	-	-	-	2
Other Diseases of Circulatory System	M	1	-	-	-	-	-	1	-
	F	2	-	-	-	-	1	-	1
Influenza	F	1	-	-	-	-	-	-	1
Pneumonia	M	3	-	-	-	-	-	-	3
	F	3	-	2	-	-	-	-	1
Bronchitis and Emphysema	M	3	-	1	-	-	1	-	1
Other Diseases of Respiratory System	M	1	-	-	-	-	-	1	-
Peptic Ulcer	M	1	-	-	-	-	-	1	-
Appendicitis	F	1	-	1	-	-	-	-	-
Diseases of Musculo-Skeletal System	F	1	-	-	-	-	-	-	1
Congenital Anomalies	F	1	-	-	-	-	-	1	-
All Other Accidents	F	1	-	-	-	-	-	-	1
Suicide and Self-inflicted Injuries	F	1	-	-	-	-	1	-	-
TOTAL ALL CAUSES	M	34	1	1	-	2	1	9	20
	F	39	1	3	1	2	4	5	23

Cardio-Vascular diseases again head the list of the causes of death, claiming forty two of the seventy three. Of these, forty per cent were due to Coronary Thrombosis. While the exact cause of this Vascular catastrophe has not yet been fully unravelled there are certain factors which do undoubtedly play a part. It is very wise to take adequate exercise regularly, the sedentary worker avoiding violent outbursts of unaccustomed physical activity at the weekend. Eating and drinking to excess should be avoided and as an index keep a check on the abdominal girth measurement - a glance in the mirror will suffice, for it can be most informative! Cigarette smoking in excess also plays a part and so does living uninterruptedly under tension and stress.

"The world is too much with us late and soon,
Getting and spending we lay waste our powers."

- and Wordsworth might have added our Coronary arteries, so do seek a little time each day for quietude and peace.

"Sometimes I sits and thinks and sometimes I just sits!" is not inappropriate.

With the triumphs of medicine, surgery and environmental health, people are living much longer but inevitably as man is mortal many succumb to degenerative Cardio-Vascular and other degenerative diseases. It is accordingly worth noting that of the deaths recorded this year forty three or sixty per cent were aged 75 or over.

Malignant growths hold second place in the death table with thirteen and of these, three were due to cancer of the lung, making thirteen in the past four years. So the deadly toll of this largely preventable disease goes on in defiance of the known facts of its association with Cigarette Smoking. It is slow and insidious in its onset, difficult of early diagnosis and the outlook for treatment shows no improvement. Prevention is the only wise and rational approach to the problem. In an age when rockets and jets are venturing into the Unknown, it is disturbing that so many young people are laying their own smoke trails to a like destination!!

There were two deaths from breast cancer. Women should learn the easily assimilated technique of self examination of the breasts, as early detection of an abnormal swelling warrants attention and should it prove malignant allows treatment at the earliest stage, when this condition is most amenable to this and to cure.

The Respiratory Group of diseases, excluding lung cancer, accounted for eleven of the deaths, four more than in each of the two previous years. Six of these were pneumonia, an index of the prevalence of influenza in the early months of the year. Bronchitis was the terminal event in three. This is known on the Continent as "The English Disease" because it is quite uncommon abroad. In some instances it is initiated by infection but in the majority of cases

atmospheric pollution is the dominant cause, and in this area of clean air it would appear smoking is an incriminated factor in the disease also. Last year thirty five million working days were lost in this country from Bronchitis alone - against thirty million from all other respiratory diseases put together. It certainly inflicts a heavy burden on the sufferers, their family, the Health Service and Society.

The accidental death was that of an 84 year old lady who succumbed to a fall in her own home. This again stresses the necessity for all who are interested in the safety and wellbeing of the elderly to ensure that their homes are kept as free of hazards as foresight and common sense can anticipate.

Attempted suicide has increased by six times in six years on a National basis. It is sad that Bourne should this year have added one to those where the attempt has been successful. The case was that of a sixty one year old woman who drowned herself in the Carr Dyke. This is the second in two years to have chosen this way out of their misery of mind. Such deaths must continue to be a challenge to our Society, to our Way of Life and to the Medico-Social Services.

HEALTH SERVICES IN THE AREA

Nursing in the Home

Under the County Council scheme there are two District Nurse/Midwives who serve the Bourne Community and parts of the adjoining area.

Welfare Food Services - Mrs. G. Watts, Telephone Number Bourne 2212.

These are provided from the North Street Welfare Centre and are available between the following hours:-

Mondays and Wednesdays	9.30 a.m. - 12.30 p.m.	and	2.00 p.m. - 4.30 p.m.
Thursdays	9.30 a.m. - 12 noon	and	2.00 p.m. - 4.30 p.m.
Tuesdays and Fridays			2.00 p.m. - 4.30 p.m.

Home Help Service

Home Helps are provided for Bourne by the County Health Department. Application should be made to Mrs. I. M. Pepper, District Home Help Organiser, Barn Hill Clinic, Stamford. Telephone number Stamford 2906.

Monday to Friday	8.45 a.m. - 12.30 p.m.
	1.30 p.m. - 5.15 p.m.

This service is engaged now almost exclusively in providing for the needs of the elderly. It also gives its support to the disabled, the problem family and in cases where there is a sudden domestic crisis.

Twenty two part-time Home Helps are employed in the Bourne Urban District area and during this year had eighty cases on their books. All but three of these were over 65 years of age and are likely to be permanently in receipt of help.

A night attendance Service is also available in case of need. There are eight Good Neighbours giving support to eight cases.

Health Visiting

Under the County Council Scheme, one full time Health Visitor should cover Bourne and a little of the Rural District of South Kesteven adjoining it. For the past two years this post has been vacant, though Miss Hetherington from Stamford has carried on a few of the most urgent duties and has been helped by Miss Henfry, the local School Nurse.

The duties embrace an advisory service to the whole family and in particular to the weaker members of the Community - the under five year olds, the Handicapped school child, the Physically Handicapped, the Elderly and Socially incompetent. Only rudimentary cover can possibly be afforded to these due to the current staff shortages.

Mental Welfare

Mr. H. S. Townsend, Mental Welfare Officer provides the link between the family doctor, the mentally ill patient and the hospital service. He also carries out the statutory duties laid down in the Mental Welfare Act 1959 and does preventive work in this field, covering the Bourne area. He is based at Barn Hill House, Stamford, Telephone Number Stamford 2906, but lives at Bourne where his Telephone Number is Bourne 2983.

Ambulance Service

Two ambulances and two dual-purpose vehicles are stationed in Bourne. As usual all the demands made upon the service were efficiently met.

Infant Welfare and School Clinics

The school clinic is held on Thursday mornings at the Welfare Centre, North Street. The writer is unable to attend as frequently as he would like, owing to other commitments clashing

with it. It is increasingly being used for infant welfare work and special medical examinations.

The regular Infant Welfare sessions continue to be held on the first and third Thursday afternoons in each month and the average attendance at these clinics was fifty, with a total for the year of two thousand, four hundred and ninety four. The number of babies brought to the clinic this year for the first time was one hundred and sixty eight. It is staffed by a State Registered Nurse and the writer. I would like to take the opportunity of thanking the band of voluntary workers who provide invaluable ancillary services, amongst other things making available infant food and supplements at concessionary prices, infant weighing and record keeping. They do so much to make the social side of these clinics a success and devote much time and enthusiasm to their task.

No case of phenylketonurea was found during the year.

School Health Service Clinics

Regular Ophthalmic, Physiotherapy and Speech Therapy sessions are held at the North Street premises for the under school age and school age child. It is possible that the Ophthalmic Clinic may be hospital based at a later date. The School Health Service also provides a Psychotherapy clinic at the Children's Hostel, West Street, Bourne. Dr. V. Holdway, Consultant Child Psychiatrist is in charge of this.

School Dental Service

During the year, one thousand, four hundred and seventy five school children were inspected and of these, one thousand and eighteen were found to require treatment and were offered it. Of these a total of eight hundred and fifty three completed their course of treatment. Twenty seven new orthodontic cases were started on treatment and twenty four dental appliances were fitted. The ratio of fillings to extractions was 1504 to 968. During the year, three hundred and twenty two sessions were devoted to treatment, sixty two to inspection and thirty nine to Dental Health Education.

Immunisation

Free Diphtheria, Whooping Cough, Tetanus and Poliomyelitis immunisation is provided by the family doctors under the County Council scheme, as is vaccination against Smallpox also. A small number made use of the same services which are available to them at the North Street Clinic, these come in the main from the surrounding villages.

Mothercraft and Relaxation Classes

During the year nineteen young expectant mothers attended these classes making an aggregate

attendance of one hundred and sixty eight. These classes are greatly appreciated by all who attend the course of eight sessions. As well as educational they are made pleasantly social occasions. Health educational films are shown in addition to those specifically designed for mothercraft purposes.

These Meetings are worthy of a greater response. The Classes are held on Wednesdays from 2.30 p.m. to 4 p.m.

Cervical Cytology Clinic

This clinic is held at Barn Hill House on the second and fourth Thursday afternoons in each month. During the year three hundred and sixty five patients attended and of these several came from Bourne.

Two unsuspected cases of Cancer of the Cervix were detected and referred to the Gynaecologist for the necessary treatment. Additionally, nineteen were found to have other gynaecological conditions requiring treatment.

The clinic is shared by Dr. A. Whiteley and the writer.

Appointments can be made with Mrs. J. Williams, Centre Secretary, Barn Hill House, Stamford - Telephone 2906. All women should accept this preventive service.

Hospital Services

These are provided by the East Anglian Regional Hospital Board, who control the Bourne Butterfield Hospital and the Chest Hospital in Bourne. The main general Hospital Services however, are provided by the fine new District Hospital at Peterborough and the Stamford Hospital.

Venereal Diseases

Clinics are held at the out-patients department, Memorial Hospital, Peterborough under Dr. N. A. Ross.

Males:- Mondays 5 p.m. - 6 p.m. Wednesdays 5.30 p.m. - 6.30 p.m.

Females:- Tuesdays 10.30 a.m. - 11.30 a.m. Thursdays 4.30 p.m. - 5.30 p.m.

Laboratory Facilities

Bacteriological investigations, including milk examinations for brucellosis are carried out

by the Public Health Laboratory under the control of Dr. Glencross. I would like to acknowledge with gratitude the ever generous help, advice and courtesy which have been extended to us at all times by the Director and his Staff.

PREVELANCE AND CONTROL OVER INFECTICUS DISEASES

	<u>Erysipelas</u>	<u>Pneumonia</u>	<u>Measles</u>	<u>Scarlet Fever</u>	<u>Infective Hepatitis</u>
Under 1 year	-	-	1	-	-
1 - 2	-	-	4	-	-
3 - 4	-	-	2	1	-
5 - 9	-	1	1	4	9
10 - 14	-	-	-	3	7
15 - 19	-	-	-	1	9
20 - 34	-	-	-	-	12
35 - 44	-	-	-	-	5
45 - 64	-	-	-	-	2
65 and over	1	2	-	-	-
Ages unknown	-	-	-	-	2
Totals	1	3	8	9	46

The incidence of notifiable infectious diseases, excluding Tuberculosis, was sixty seven compared with sixty six in 1967 and one hundred and ninety one in 1966. The composition, however, was very different as two thirds of the notified cases were of Infectious Hepatitis and of these all but one occurred in the St. Peter's Hospital for the mentally subnormal. The outbreak started with the transfer into the area of some new patients from the parent Hospital at Harnston in the early summer and it smouldered on throughout the remainder of the year in spite of efforts to control it. The mode of transmission is through person to person contact, by the faecal-oral route; and also respiratory spread is possible. The incubation period can be anything from fifteen to fifty days, commonly being four weeks. Additionally, the patient is infectious for several days before the disease becomes manifest. When all of these factors are realised and the infection gets into a closed community such as this one it does provide a problem of control relying as this does on impeccable standards of personal hygiene.

There were no cases of Dysentery or Food Poisoning for the second successive year. This is a pleasing omission from the list.

The incidence of Measles was down to eight from the sixty one of the previous year. This can hardly be credited to the new measles vaccine which became available during the latter part of the year. The demand for this was not so great as might have been thought, possibly due to the whisper that the side effects were more pronounced than with the other well known vaccines

commonly used in childhood. It will be a great boon when a measles vaccine is generally accepted so as to stamp out the biennial epidemic of the disease, which brings quite a toll of complications in its train.

It is now eighteen years since Poliomyelitis and twenty one years since Diphtheria last were seen in the town. This is a wonderful mercy but a clemency which cannot be maintained without effort. This consists in every mother ensuring that her child is immunised against both diseases during their first year of life and again at school entrance age. This requires education and discipline on the part of the parent to make her see the vital necessity of continuing the fight against ills which she has fortunately never seen. There is no room for complacency and it is most encouraging that the mothers of Bourne realise this and at the end of the year ninety three per cent of those eligible had been immunised against Diphtheria, compared with the County average of eighty one per cent and ninety two per cent had been protected against poliomyelitis against the County average of seventy six per cent.

The ideal time for vaccination against Smallpox, provided there are no medical contra indications to it in the individual case, is early in the second year of life. This is much better than on the eve of a foreign holiday or business trip.

In spite of the rather sensationalised National apprehension about Hong Kong influenza it fortunately did not put in an appearance.

All new personnel of the South Lincolnshire Water Board who are employed in this area in any capacity which brings them into contact with the actual water supplies have blood samples taken by the writer for Widal examination. This is a necessary safeguard to ensure that no one with unsuspected and dangerous gastro-intestinal infections will be permitted to contaminate the Public's drinking water. The Council supply all their workmen at occupational hazard from rats with a card of warning and precautions against Weil's Disease. This was particularly appropriate this year as due to climatic conditions the rat population was high. Any employer can obtain copies from the Health Department, who has men and women engaged in places where rat contamination is at all possible. Suffice it to say that this type of jaundice is both unpleasant and dangerous.

For a number of years past, through the medium of this and similar reports there has been agitation for the infectious diseases which are compulsorily notifiable to be reviewed and brought into step with modern needs. Much of what was asked for was contained in the Infectious Disease Regulations of 1968. Under these Pneumonia, Membranous Croup, Erysipelas, Puerperal Pyrexia and Acute Rheumatism were dropped and Leptospirosis (Weil's Disease), Tetanus and Yellow Fever were added. Why Brucellosis was not included is hard to understand. The mere fact that its diagnosis is difficult is insufficient reason.

Venereal Disease

Forty new cases of Venereal Disease attended the Clinic at the Peterborough District Hospital from the South Kesteven area which looks to it for treatment. Of these, three were from Bourne - two males and one female. None of the three were in the toonage category. This however, cannot be reckoned as the full incidence as some temporarily away probably seek treatment outside of this area.

It cannot be stressed too highly that the "Pill" is no protection against infection. Only avoidance of casual sexual relations will do so.

Self Control and Continence are the only true prophylactics against these diseases. These are, after all, not such reactionary concepts of behaviour as some sociologists might have us believe - who as a cynic said, "Study the habits and motives of others but maybe are more in need of that study themselves."

The Venereal Disease rate has grown rapidly in recent years, in spite of all the improvements in material things, in the higher Standards of Education and the improved methods of treatment rendering uninfected those who do acquire the disease. Some groups in the population have contributed more than others to the rise. These special groups are the young; girls in particular, travellers often spurred on by loneliness and male homosexuals. Those who live in the big cities are more "at risk" than those living in rural districts, hence the special vulnerability of those who leave this part of the country to train and start work in the Conurbations.

The B.C.G. Vaccination scheme is now in its ninth year. All children aged thirteen years and upward and eligible for vaccination against tuberculosis. In Bourne, of one hundred and thirty eight eligible, one hundred and thirty six were skin tested. One hundred and twenty nine were negative and were subsequently vaccinated. Seven were positive showing that at sometime they had had active knowledge of the tubercle organism.

Maybe with so many staying on at school an extra year and the children attending Grammar School remaining until eighteen + years, the age of thirteen is a little early for this preventive measure, as the time when the maximum protection is required is at the period when the comparatively sheltered school life is exchanged for study, work and apprenticeship in many other parts of the Country.

Tuberculosis

For the third successive year, there were no cases of Tuberculosis of either the pulmonary or non-pulmonary varieties and no death was recorded from the disease. However, it is still the cause of much illness and disability as is shown by the fact that over the year one hundred and

ten patients attended the Bourne Chest Clinic, of which four were newly found cases. One of this total was actively infectious during the period.

I wish to acknowledge the continuing fine liaison which exists between Miss Hetherington, our Health Visitor and Dr. Bernard Royce and the staff of the Bourne Chest Hospital. Miss Hetherington visits the Hospital regularly and there is a full and frank interchange of information on the domestic, social and environmental factors on the one side and of the patients condition and progress on the other. This co-operation is alike invaluable for the contacts and the patient.

SANITARY CIRCUMSTANCES OF THE AREA

The responsibility for the supply and distribution of water is that of the South Lincolnshire Water Board on which Bourne is represented by one member.

The water is obtained by a 36 inch and a 13 inch bore and is abstracted from the reservoirs in the depths of the Lower Oolite strata of the Lincolnshire Limestone belt and consequently is one of the purest waters in the Country.

A typical sample is clear and bright in appearance, neutral in reaction and is free from iron and other metals. The water is very hard in character but is not considered excessively so. It contains no excess of mineral constituents and it is of a very satisfactory organic quality. In fact, as the Analyst says, "From the aspect of the chemical analyses the results are indicative of a pure and wholesome water, suitable for public supply purposes."

There is no fluoride in the water. The total hardness at 385 parts per million is high, as any housewife will say who likes a plentiful lather, but there is little likelihood of plumbo-solvency from it.

I am most grateful to Mr. Eagles - Engineer and Manager to the Board - for his continued co-operation and exchange of information throughout another year.

I also appreciate the following report on the new work done during the year in Bourne.

"The whole of the Bourne Urban District area received its supply from the source works at the Manning Road Pumping Station, Bourne.

The total quantity of water supply to the Bourne Urban District during the year was 78,304,000 gallons. The average daily quantity supplied was 214,000 gallons which based on a population of 5,750 represents a consumption of 37.3 gallons per head per day.

Regular weekly samples of water were taken for bacteriological analysis throughout the year

at both the source of supply and various points in the distribution system, all of which gave satisfactory results.

The following table indicates the lengths and diameters of mains laid in the Urban District during the year:-

Location	Diameter			
<u>Bourne U.D.C.</u>	3"	4"	10"	Total Yds.
<u>New Mains</u>				
West Road - Manor Lane Site	180	116		
Forest View Estate		40		
TOTAL YARDS	180	156		336
<u>Board Relay</u>				
West Road - Manor Lane			244	
Cawthorpe Village	400			
TOTAL YARDS	400		244	644
TOTAL				980

The net increase in domestic services was 27

The detailed chemical analysis showed no change from that of 1967 and so is not being repeated in this year's report.

The total consumption of water showed a steep rise over the previous year and so far as this represents an increased and legitimate use for domestic purposes this is to be applauded. However, there is a correspondingly increased demand on the sewage disposal services throughout the whole system from the curtilage of each property to the complexities of the sewage disposal works and beyond. There is no-one who knows just how great these pressures are in practical terms than Mr. M. Silverwood, our Surveyor, with his constantly watchful and appraising eye. He has most kindly commented on the Sewage Disposal system as follows:-

"In furtherance of the general development of the town's sewer system, further extensive work has been carried out. In last year's report the extensions to the disposal works were completed and this created a vast improvement in the effluent and it is now the policy of the Council to proceed with the laying of new main sewers in the town. Towards the end of last year the Ministry were fully satisfied with the details of the next stage and instructions were given to proceed to obtain tenders. This was done and commencement of the scheme was made in July, with a contract sum of £115,000. Good progress, despite extremely adverse weather conditions throughout the year, was made and already improvements to the general conditions in the town are being felt. It is hoped that the whole scheme will be completed by the middle of 1969. The general scheme was detailed in last year's report but it is interesting to point out that already certain areas in the town which have suffered from flooding in the past, have not suffered subsequent to the laying of the new sewers. This fact, despite the record high rain-fall, is a satisfactory side effect of the work being carried out. There has been no noticeable effect on the amount of infiltrating water at the works but it is hoped with the surface water sewers re-diverting from the new foul water sewer being constructed, the final result at the works will be as satisfactory as has been the experience to date.

As stated above, the results throughout the year, from the Sewage Works have been highly satisfactory and in fact only one of the standard analyses carried out by the Welland and Nene River Authority has been proved to be slightly unsatisfactory. This was due largely to the considerable amount of shedding of the filters during last spring which, because of fluctuations in temperatures over a long period caused a certain amount of trouble for some weeks. The problem of sludge and particularly sludge from the humus tanks, has caused a great deal of work. Obviously, due to the fact that extensions to the works give a far better effluent, this in turn had created a greater volume of sludge, particularly from the humus tanks. In conjunction with Mr. Maxfield, the Council's Chemist, a system of re-circulation of humus sludge was constructed. This re-circulated sludge from the humus tanks, back to the inlet of flow of raw sewage and as a result was deposited in the settling tanks and mixed with the sludge from those tanks. The resulting sludge obtained was an easier type to be dealt with in the drying beds and did to some extent help the general purification process. It is therefore proposed that when this situation arises again, the same process be carried out and in fact whenever the need arises to improve on the quality of humus sludge for drying purposes.

The smooth running of the Sewage Works during a very troublesome year was not only due to the close attention at all times of the maintenance staff but also to the ready advice and regular sampling by Mr. Maxfield.

During the latter half of the year, probably the most important subject in the minds of the Public Health Committee was the question of Surface Water Drainage. There is no doubt that there are difficulties in the surface water system of the town and due to the unprecedented amount of rain-fall during the year and flood conditions existing at various times, great emphasis was shown

on difficulties and inadequacies which have been in existence for many years. As regards the rain-fall, the annual average rain-fall as issued by the Meteorological Office for the district was 23.00 and in fact 30.3 of rain fell in the year. The other fact which is very relevant is that by far the greater volume fell in the period July to December. According to statistics provided by the Welland and Nene River Authority the soil moisture deficit was at zero from September onwards. This means, in fact, that from the middle of September any further rain-fall would be unable to percolate and would simply be run-off water. In a normal year such a situation very, very rarely arises and in fact during the season the factor arises from around two inches after the winter to six inches in November. This one fact clearly demonstrates that the continuous rain-fall from July onwards saturated the surface ground to such an extent that flood conditions arose in even comparative average storm times. The first serious storm in July gave 3.25 inches of rain in under twenty four hours and this was an amount which has never been recorded before and as a result the district has never recovered since, during the year. The concern of the Public Health Committee over the difficulties of the public in the district has been considerable and their Consultant Engineers were instructed to provide a report as quickly as possible. This report was presented at their December Meeting, and the financial implications were such that it was felt necessary to hold a special meeting which was to be held in January, 1969. In the meantime I was instructed to proceed in carrying out preliminary surveys of various methods of dealing with the considerable flood waters which come through the built-up area of the town. The Council are dealing adequately with the general surface water content of the built-up area of the town but major difficulty is caused by the large volume of water which enters the town from various water courses and is directed via two main surface water drains through the built-up area of the town. I have no doubt that the work carried out by the Welland and Nene River Authority on the Carr Dyke and completed last year, has proved of unestimable value to the overall drainage arrangements. In fact, if this work had not been completed, there is no doubt that the town would have suffered far more severely from flood conditions than was the case during the year. The main hope of the Public Health Committee is that during the forthcoming year preparatory work will be proceeded with, in formulating some overall surface drainage policy, fully compatible with the financial ability of the Council to deal with the problem to the full benefit of all rate payers who have been affected in the past by this serious problem.

Prior to this year, in normal flood conditions there are various locations where flooding has occurred previously but do not now cause trouble where the Council have carried out work. I refer particularly to Bedehouse Bank, Willoughby Road and Coggles Causeway and it is the intention of the Council to further this work. The various developing residential sites have made progress during the year and the full benefit of the work carried out in the previous year by the laying of a new trunk sewer from West Road to South Road is now being fully utilised. In addition to the West Road Housing Sites, a new development has commenced in Mill Drove and this development will further increase the use of the Sewage Works and sewerage system. Whilst there is some capacity in the Sewage Works there is no doubt that the scheme for increasing the capacity of the Works will have to be proceeded with in the very near future. This scheme must again be considered by the

Committee and indeed the Council, in the context of the question raised under the subject of Surface Water Drainage. The Public Health Committee will, in the forthcoming year, have to decide on what form of priority the various work, which is all essential, must take and it is indeed an extremely difficult decision to make but quite clearly the financial implications are of such magnitude, to require phasing.

There are, in addition, signs that development of both residential, commercial and industrial premises are increasing and the Council have resolved for some time that every encouragement must be given in the field of Industrial Development. It would not be sound policy therefore, for the Public Health Committee to reach the position of having to advise the Council that development must be cut, due to the lack of adequate drainage facilities. Apart from the considerable rateable value which is necessary for the economic viability of Bourne, the general benefit of residents, businesses and all concerned are affected and improved by the injection of new industry and residential development.

It is apparent therefore, that the Public Health Committee will have a great number of serious problems to consider in the future, decisions which affect to a great extent more than any other item, the general rate and also the general wellbeing of the inhabitants of the town."

The River Boards - and rightly - demand that there shall be no pollution of the waterways for which they are responsible and lay down strict chemical and biological criteria for the acceptance of effluents.

At the same time the domestic householders and businesses are using a multiplicity of highly sophisticated chemical cleansers, solvents and disinfectants which throw heavy demands upon sewage disposal works themselves. In this particular task of producing from the raw sewage an acceptable final effluent and maintaining it as such, we have been greatly helped by the conscientious routine sampling, analysis and advice of our Staff Chemist, Mr. Maxfield. Let him speak of his work:-

"The Laboratory

After quite a lengthy period of working in temporary quarters, the new Laboratory was occupied in May, 1968. This has afforded excellent working facilities and widened the scope of analytical investigations.

Sewage Disposal Works

In general the efficiency of the Sewage Disposal Work in the Bourne Urban District Council area has been affected to a greater or lesser degree by the very bad weather conditions prevailing throughout the year. This was particularly noticeable with regard to the Biological Filters. It is a well known phenomenon that as soon as the air temperature increases after a cold winter, large

quantities of humus sludge are discharged from the Filters. This is a natural effect brought about by the activity increase of micro and macro organisms which have been lying dormant in the lower parts of the filter during cold weather. In 1968 however, the frequent fluctuation from warm spells to very cold spells has resulted in a very abnormally long period of humus discharge.

Standards of Effluent required by the Welland and Nene River Authority and the Lincolnshire River Authority.

All sewage works effluents in both the South Kesteven and Bourne Urban Districts must conform to the Royal Commission standard -

i.e. B.O.D. not to exceed 20 ppm.

Suspended Solids not to exceed 30 ppm.

Bourne Urban District Council - Sewage Treatment Works.

The rather unusual weather conditions experienced throughout almost the whole of 1968 have tested the efficiency of the Works to the limit. However, apart from one very short period of difficulty in June due to the accumulation of excess sludge, I am happy to report that the effluent quality has been satisfactory with regard to B.O.D. (Biochemical Oxygen Demand), and very satisfactory with regard to Suspended Solids.

During the year, with the very helpful co-operation of Mr. Silverwood (Surveyor and Engineer) several methods of improving the efficiency of the works have been discussed, and in one particular case put into operation. The case in question is that of returning humus sludge from the final settling tanks to the inlet of the works where it is treated in admixture with the crude sewage. A temporary plastic pipeline was used to effect this operation and to date, the result has been two fold. (a) The mixed primary and humus sludge has been shown to dry more quickly and (b) there has been some reduction in both the B.O.D. and Suspended Solids in the final effluent.

One rather persistent problem which arises during times of dry weather flow is that of poor distribution of sewage on to the filter beds. This problem has been discussed with all interested parties (Mr. Silverwood, Consultants and an Engineer representing the makers of the distributors, Tuke and Bell). Several suggestions were discussed and mostly rejected on grounds of costs. However, Mr. Silverwood and myself consider that recirculation of final effluent will not only cure this problem but also bring about an increase in the load capacity of the works. It has been established that all the necessary pipe work for recirculation is in fact already laid and requires only a pump for it to be immediately put into operation. In view of the new sewerage scheme at present in operation in Bourne to separate storm water, recirculation may in fact become a necessity in order to dilute the rather strong sewage which one would expect to achieve after such a scheme.

From time to time during the latter part of the year, considerable quantities of waste motor oil have entered the works. Not only does this cause a great deal of nuisance with regard to fouling of concrete channels etc. but if allowed to get into the biological filters it can have disastrous effects on the bacteria and scouring organisms present. Mr. Silverwood has undertaken to trace the source of discharge but in the meantime all credit must be given to the plant operators for their unceasing efforts towards preventing the oil polluting the filters.

Sludge Disposal

Due to the very wet weather experienced in the second half of the year and, to some extent, the large quantities of humus sludge expelled from the filters in the earlier part of the year, there has been some degree of difficulty in disposing of liquid sludge. In view of this, Mr. Silverwood purchased a length of plastic pumping main to transfer sludge from the full storage tanks to temporary earth lagoons. This proved very successful, although there is a limit to the amount of sludge and the length of time this may be carried out. More modern methods of sludge disposal, independent of weather conditions, would seem to be the only real answer to the problem.

Welland and Nene River Authority

A sample of effluent taken by the Inspector of the above Authority on 4th April, 1968 was described as unsatisfactory.

The routine samples taken by the Council's Laboratory were also below standard at this particular time and efforts to overcome the problem were well in hand before the above report was received. This particular problem was caused by the excess of humus expelled from the filters as mentioned earlier and matters were very quickly put right. A series of samples was taken daily over a period of one week and all were of a satisfactory standard. A copy of the analyses was sent to the River Authority in order to confirm that the problem had been overcome.

All other samples taken by the River Authority were described either as "satisfactory" or "a discharge of good quality".

Analytical Results for 1968

Average for year	Crude Sewage	Primary Effluent	Final Effluent	Percentage Purification
B.O.D.	273 ppm.	134 ppm.	17.8 ppm.	93.4%
Suspended Solids	301 ppm.	106 ppm.	16 ppm.	94.6%
C.O.D.	605 ppm.	289 ppm.	65 ppm.	89.3%
(Chemical Oxygen Demand)				
Flow	538,000 gallons per day.			
Rainfall	28.19" (Taken at Lound Depot, S.K.R.D.C.)			

During the early part of the year, 100 gallons of 25% sulphuric acid was disposed of at the works at the request of The Central Electricity Generating Board.

This was easily dealt with and under complete control without ill effects either to the works or the river. Co-operation of this kind is essential where such chemicals are to be disposed of as indiscriminate dumping can lead to polluted water courses or even complete failure of sewage disposal plants.

Village Treatment Works - Twenty

Several samples from this works have been analysed and whilst the filter works quite well there is no tank for separation of humus solids before final discharge to the nearby watercourse. The result is an effluent with very great fluctuations in quality particularly with regard to suspended solids. Mr. Silverwood proposes to install a humus tank which will greatly improve the quality of the effluent.

Analytical Results 1968. Average

Final Effluent

B.O.D.	50.2 ppm.
Suspended Solids	110 ppm.
C.O.D.	204 ppm.

Miscellaneous Investigations.

Effluent from Bourne Chest Hospital

At the request of the Medical Officer of Health, a sample of effluent from the above establishment was obtained and analysed. The effluent was of good quality but obviously very much diluted by either ground water or surface water.

Algae Growth in water supply taken at Cawthorpe House, Cawthorpe

The Bourne U.D.C. Public Health Inspector requested me to look into a reported growth of unknown nature in a soft water Header tank at the above house. The growth was found to be green algae and since the water was established to be used only for washing purposes no danger to Public Health could be envisaged. However it was suggested that the system should be cleared out and sterilised and in future a cover placed over the water supply tank.

Proposed Trade Effluent

The Surveyor of Bourne U.D.C. asked me to investigate the possibility of accepting a proposed trade effluent into the Bourne sewers for treatment at the sewage works. An investigation was carried out and discussions with all interested parties took place. It now seems probable that the trade effluent will be treated by the firm involved and they will negotiate with the appropriate River Authority to discharge it direct to the nearest watercourse at a standard of purification acceptable to the River Authority. In view of the rather confidential nature of work involved at the traders premises and also Section 12 of the 1961 Rivers (Prevention of Pollution) Act, the name of the traders and the nature of work will not be mentioned here.

I would like to express my appreciation of the very willing help and co-operation given to me by Mr. Silverwood in particular and the rest of the Bourne U.D.C. staff and sewage disposal operators in general throughout the year.

Odour Problem (Morton and District Sewerage Scheme)

During the year, as a result of complaints from residents in Dyke and Mill Drove, Bourne, a thorough investigation into the cause and cure of the above problem was carried out.

The cause of the problem was quickly found but the permanent cure was far from simple.

Due to inaccessibility to the rising main and the nuisance involved in taking it out of service, removal of the bacterial film from the inside of the main would be impracticable by mechanical methods of cleaning.

A large number of different types of bacteriacides have been investigated and most of the modern ones have been rejected by the River Authority on the grounds that they are not removed during sewage treatment and are highly toxic to aquatic animal life. The remainder have been rejected because of the very high cost that would be incurred.

As a result of the various methods of cure investigated, a report was prepared for the attention of South Kesteven R.D.C.'s Consulting Engineers suggesting that the long term answer would best lie in direct Chlorination of the offending rising mains using liquid chlorine. At the moment the Consultants are investigating the matter with regard to cost.

During all this investigation, steps were taken to put a stop to the problem at the earliest possible time, having regard to the number of complaints. The odour of the sewage was very quickly reduced to a normal level using a liquid steriliser, although this was fairly expensive and rather inconvenient to handle and control.

Modern Problems of Sludge Disposal

During the purification of sewage approximately 25 tons of dry solids per annum is produced from every 1,000 persons. Unfortunately the nature of the solids is that of a liquid sludge containing about 97.5% moisture and therefore represents approximately 175,000 gallons per 1,000 population per year. With a total population of approximately 8,000 persons served by sewage disposal facilities the volume of liquid sludge which has to be dealt with is very considerable.

The very old established method of dealing with this sludge is to run it on to "drying" beds where moisture is lost by drainage to some extent but by evaporation to a larger extent. It will be evident therefore that the weather plays the deciding factor in the drying process and indeed during prolonged wet or even just damp weather there is an inevitable back log of sludge waiting to be dealt with.

The conditions prevailing during 1968 have served to illustrate this ridiculous dependence on the vagaries of the English climate.

Many Industrial concerns and Research Workers have spent huge sums of money on the development of mechanical methods of dewatering liquid sludge. Most of the methods, which are quite independent of the weather, have been thoroughly tested under actual working conditions and have proved their worth. Unfortunately relatively few Local Authorities seem to be willing to adopt these new methods, possibly because of doubt or again the initial capital cost. Whilst it must be admitted that these new schemes are fairly expensive one has to balance this against the huge areas of land required by drying beds, not to mention the cost of sludge storage tanks which are vital during wet weather.

The situation can be likened to a factory production line. During the line production of any article whether it be cars, washing machines or sewage treatment there is always a build up of unwanted waste material. Unless this waste is speedily cleared away production becomes more and more difficult until indeed it may even come to a standstill. In these days of keen and watchful River Authorities and the urgency of keeping rivers and watercourses free from pollution, the production line of Sewage Disposal must never be allowed to become slowed down, let alone come to a standstill."

One would hope to see the Chest Hospital on South Road connected to the main sewage disposal system without too much further delay.

The Council own and maintain Public Conveniences at South Street and the Recreation Ground as well as those at the Corn Exchange. All have been free from abuse by vandals this year - a comment worth making in these days.

The swimming baths provided by the Bourne United Charities have always been a much prized

amenity in the town. Though it is ideally situated, the dreadful weather of the worst summer for years reduced the attendance and curtailed the season.

For such Seasons when the vagaries of our climate are at their worst, what a boon it would be if someday finances permitted a cover and some heating to defeat the elements.

Regular sampling of the water was maintained throughout the period it was in use.

The Council are the Burial Authority and there is ample provision of burial space for the foreseeable future. There were forty nine burials during the year.

The nearest Crematorium is at Marholm, Peterborough and this alternative is being increasingly chosen.

Mortuary facilities are met most satisfactorily by that at the Stamford Hospital. As a safeguard against emergencies or some special local need, the Management Committee of the St. Peter's Hospital, Bourne have courteously agreed to make their's available to us on a casual user basis. The necessity fortunately has not arisen in the past five years, but one never knows.

A weekly domestic refuse collection from and to the house door is provided. Paper and cardboard are salvaged and during the year, sixty two tons and two cwts. were collected, for which a price of £308. 16s. 3d. was obtained. This can never hope to be an economic service in the financial sense but it is very worthwhile in saving freighter space and in the prevention of very inflammable material being carried to the tip face. The Council are fortunate in having a tipping site within such a short haul, as this does assist in keeping down costs. The expansion of the new building Estates makes increasing demands upon the service and the outcome of this is obvious. Controlled tipping is maintained and every effort made to control flies and vermin. Collection of trade waste is also offered and this service is accepted by thirty nine businesses at moderate charges.

Compared with many areas, motor vehicle disposal did not present a big problem. Two were dumped at the tip by prior arrangement and only two were abandoned within the precincts of the town.

There were no reported cases of infestation with bedbugs, lice, fleas or scabies giving a third year of freedom from these companions of dirt and self neglect. Should scabies occur in the area there are no cleansing facilities available.

After a very wet summer with plentiful food available, followed by a mild period to the end of the year, a big increase in the rat population seemed certain. This was fortunately not permitted to take place due to the efficient activities of our Rodent Operator under the campaign

management of the Public Health Inspector.

Apart from the inevitable litter following on the open air Market on Thursdays and Saturday mornings, which is quickly cleared, there is little problem in this respect. Bourne has for many years been renowned for its cleanliness and regard for aesthetics - witness its repeated success in the Best Kept Small Town in Lincolnshire Competition. This attribute has been well maintained.

INSPECTION AND SUPERVISION OF FOOD

The two slaughterhouses provide a fully adequate service to the town and also supply a substantial surrounding area. A hundred per cent meat inspection has been maintained throughout the year.

The Codes of Practice based on the Food Hygiene Regulations are known and accepted by all food businesses. While this is so it is all too easy for lapses to occur in individual cases and for a gradual deterioration of the premises themselves or the techniques to below acceptable levels. It is not always the glass-topped counter and the attractive packaging of articles on display that counts. It may be different when one passes these and enters the other world where the stores are received and kept and hulk is broken down preparatory to the items being exhibited on those impeccable looking shelves.

The Health Inspector plays an invaluable preventive role. Under his friendly yet critical eye the owner can be advised and the public protected.

In the light of these observations, it is difficult, however hard they strive, for the owners of Market Stalls, the stalls at open air fêtes and similar improvisations from which food is sold to comply with their full responsibilities.

There is an overwhelming case for the registration of all food premises. This would insure that they started life up to the full standards required and would assist in a comprehensively watchful eye being kept on them.

Mr. Hawley, Chief Inspector of Weights and Measures took eighteen samples under the provisions of the Food and Drugs Act 1955. The articles sampled were as follows:-

Cheese	1	Milk	10
Coffee	1	Milk Condensed	1
Margarine	1	Sausages	2
Meat Products	1	Tinned Fruit	1

Commenting on these Mr. Hawley said:

"MILK

Cows' milk remains a staple food, one of the most important in the nation's diet, and approximately one and a half thousand million gallons of liquid milk were consumed in the United Kingdom during the year. It is essential, therefore, that milk productions should be maintained at a high level and that 'quality' as well as quantity should be given every priority. While the 'keeping quality' of milk is enormously important (and this, of course, depends on factors which are outside the scope of this Report), an equally important factor is its nutritional value, for milk contributes protein, calcium and other essential nutrients (as well as vitamins) in a form which most humans find palatable and assimilable. Milk is an extremely complex substance and though anything from 85% to 89% of natural milk may be water, the special blend of solids (which always includes 3% or more of butterfat) is one of nature's masterpieces. Strangely enough, there is really no statutory standard for milk - it must merely be sold 'as it comes from the cow' with nothing added and nothing taken from it. The Law does say, however, that if the solids are found to be less than 3% butterfat and 8.5% other solids there shall be a presumption that the milk has been adulterated, unless the contrary can be proved. At certain seasons and for certain reasons, individual cows do give sub-standard milk, but this can be ascertained by taking what are known as 'appeal-to-cow' samples at the farm. There is one exception to the presumptive standard and that is in respect of Channel Islands or South Devon Milk which, if sold as such, must contain a minimum of 4% butterfat, but even the best Channel Islands milk will still contain about 85% water. The deliberate watering of milk has always been held to be reprehensible, but nowadays, it is extremely rare.

Channel Islands milk continues to sell well and for those who like the extra butterfat it has many attractions. It has become a convention in the 'trade' to use gold caps for bottles of Channel Islands Milk, but this is not a statutory requirement and in some parts of the country it is not observed.

MARGARINE

Margarine (from the Greek word 'margaron' - meaning a pearl) was given this rather attractive name after being evolved as a butter-substitute by a French scientist in 1869. However, it made little headway in this country until the early years of the 20th century when it was frequently mixed with butter and passed-off as the superior commodity. Needless to say, this led to a great deal of criticism and for many years now margarine has been kept firmly in its place as a butter-substitute by a succession of Statutory Instruments. The extremely powerful margarine interests have resented this and do, at least, appear to have got Miss Houston on their side, but the recently amended Margarine Regulations 1967 make no such concession. In these Regulations, Margarine is defined as.....

'.....a plasticised emulsion of edible oils and fats with water or skimmed milk, with or without the addition of vitamins A and D, sodium chloride and other permitted additives.'

The advertising of margarine in any manner suggestive of butter or of anything connected with the dairy interest is prohibited, and the amount of butterfat in its manufacture is limited to a maximum of 10% of the total fat. As with butter, margarine shall not contain more than 16% of water; but when fortified with vitamins A and D it does, in fact, become as nutritious as butter. The nine brands sampled during the year were all found to be satisfactory, having an average water content of 13.85% and vitamins above the statutory minima.

S.AUSAGES

Just as Melton Mowbray is famous for meat pies and Cheddar for cheese, so Lincolnshire has always had a name for the excellence of its sausages. A sausage, as everyone knows, is simply minced meat mixed with bread (or cereal) and seasoning; but like all simple things it can vary greatly in its make-up. During the last War, as sausages came to contain more bread than meat, the Government intervened and ordered that a beef sausage should contain not less than 50% meat and a pork sausage not less than 65%. When War-time controls were relaxed, some butchers reverted to their former inferior recipes, but in 1955 the Chief Inspector was instructed to inform all butchers in Kesteven that the recently-repealed War-time standards would continue to be observed. It is a tribute to the trade as a whole that since that time only three butchers have been prosecuted for selling sausages seriously deficient in meat.

As from 31st May, 1969 under Meat Regulations, the meat content of sausages is to be such that not less than half shall be lean meat. This should meet the frequently-voiced complaint of canteen staffs that sausages yield far too much dripping, since the offending uncooked sausage contains far too much fat. Generally speaking, however, the Kesteven pork sausage maintains the high reputation of Lincolnshire sausages."

The writer drew attention in last year's report to the importance of pesticides and herbicides in the campaign for food production. The warning however, was sounded of the scrupulous care needed in their use, particularly those which are very persistent and are stored in the human body fat.

Mr. Hawley also speaks of the problem and the present position:-

"With these facts in mind, and prompted by increasing public concern, the Association of Public Analysts, in collaboration with the County Councils Association, prepared a scheme in 1966 for a systematic survey covering England and Wales. The principal objective was to find out the extent to which food-stuffs in common use were contaminated; and to obtain a reliable indication of the contamination levels.

Between November 1966 and July 1968, 32 samples of farinaceous foods were obtained in Kesteven as the County's contribution to the scheme. Of these 32 samples submitted, only 9 were completely

free from contamination, the remainder all showing traces of residues such as aldrin, dieldrin, epoxide, heptachlor, BHC and DDT. Many of the samples contained more than one contaminant, but none contained a concentration anywhere near the danger limit laid down by the Food Additives and Contaminants Committee of the Ministry of Agriculture. Those best qualified to know have said that one part per million of these toxic substances is the 'safe' maximum and, therefore, it was gratifying to find the residues discovered in the 23 samples to be well below this level. In fact, the average contamination was less than one-tenth of this 'safe' maximum.

Although this particular exercise revealed a fairly widespread contamination of foodstuffs by pesticide residues, in not more than one in twenty of the samples was the level above the desirable limit. About 2,500 samples were analysed during the tests. Summing up the results for the country as a whole, one might say they are reassuring, though not such as to justify any feeling of complacency."

I would like to thank Mr. Hawley and his staff for all their generous help over another year.

Milk which has such a unique importance as a food was involved in a case of complaint during the year.

A Bourne resident complained of a bitter taste in milk delivered by a dairy-man from a neighbouring area. The Public Analyst confirmed this and said the "bitter taste" was due to an excess of proteolytic bacteria.

Of three samples of milk taken for antibiotic examination one contained a trace of penicillin.

Again this year the problem of Brucellosis raised its head. A sample of raw milk in the course of delivery was subsequently found to be infected with Brucella organisms. The source of the milk was traced and immediate action was taken under the provisions of the Milk and Dairy Regulations. This involved the service on the producer/retailer of an Order forbidding the sale of milk from his herd until it had been pasteurised and so rendered innocuous. This Order remained in operation from February 26th to May 8th and was only lifted when the writer was satisfied that the milk in question no longer carried a risk of infection.

The watch on the safety of our food is one which must never be relaxed, for only through constant vigilance lies security.

HOUSING

Number of Council Houses at 31st December, 1968	607
Number of Council Houses built during the year ended 31st December, 1968	NIL
Number of Council Houses in course of construction at 31st December, 1968	NIL
Number of Private Houses built during the year	45
Number of Improvement Grants given (Discretionary and Standard)	9
Number on waiting list for Council Houses	93
Number on this list needing Old Peoples' accommodation or Bungalows	32

For the second successive year no new Council Houses were constructed and none were on the stocks by the year's end.

Private enterprise fared better and produced forty five but this was five fewer than the year before and fifteen less than in 1966. This is just a reflection of the high rate of Mortgages and general interest rates which act as a deterrent to would-be house owners.

The Council continue to operate a points scheme in the allocation of their houses and so priority can be given in instances where health or socio medical factors dictate the necessity for it.

Before any allocation is made on these grounds, a report is obtained for the patient's own family doctor. A visit is paid to the house by the Health Inspector if there are indications that it is at fault and finally after all this is known the writer carries out a domiciliary visit. Only after this, is a report made to the relevant Committees and the appropriate award of Health Points confirmed.

Only thus, can the real urgency and degree of priority in each individual case be assessed and help brought to the most needy. The Health and Housing Committees have always shown the utmost concern for and desire to help in those cases recommended to them.

During the year there were thirteen applications or referrals from various sources for this type of assessment.

In Bourne there is no Slum Clearance problem, though inevitably the occasional house, nearing

the end of its useful life must come under review. If there is any chance of saving a house by reconstruction and modernisation the Council have always encouraged the owner to apply for an Improvement Grant and give it a new lease of life. That there are relatively few owners who wish to do so is suggested by the fact that whilst twenty four such Grants were made in 1967, there were only nine this year. Whether the provisions of the new Housing Act will encourage diffident owners to come forward with schemes of improvement remains to be seen.

The number on the waiting list has shown a decline to ninety three from the one hundred and nineteen of the year before. Of these, more than a third (32) require Elderly Persons' accommodation which is synonymous with bungalow or ground floor accommodation.

The most common complaints of old age are those which bring reduced mobility, be this acute arthritis, bronchitis or diminished heart function. All such sufferers with one accord dislike stairs. Those who design accommodation for our Senior Citizens must bear these attributes of ageing in mind and plan accordingly. Not only are stairs for such, inconvenient but in many cases frankly dangerous.

May the necessity for adequate insulation and heating in the homes of the elderly be once again stressed, to avoid the hazards of Hypothermia and premature death from this preventable cause.

It is quite noticeable that "would be" tenants increasingly want houses that approximate to the Parker Morris standards. This is natural and desirable. Children who are taught in their senior school about contemporary kitchen design and labour saving homes and domestic management are not likely to accept, without demur, a lower standard when they set up a home of their own.

The group of twenty two dwellings which are Warden supervised have proved a great blessing to the elderly and are a great success.

Of the eighty nine Council Houses at the end of last year which were without hot water systems a further twelve in George Street have been modernised.

This still leaves seventy seven situated as follows:

George Street	26
Harrington Street	51

The work of modernisation is continuing just as quickly as finance and man power permit.

In a Sample Census Survey carried out in 1966, the results of which have just been published, it is estimated that at that date there were two hundred and seventy homes with no fixed bath and

two hundred and sixty without hot water systems. There is still quite a programme of house upgrading to be tackled and the new Housing Grant Legislation should help in this.

There are no common lodging houses in the town.

NATIONAL ASSISTANCE ACT 1948

There was no incident involving the compulsory removal against their will to Hospital or Welfare Accommodation, of any person during the year, under the provisions of Section 47 of the above Act. In one instance however, it was at one time thought it might be necessary but repeated visits and persuasion achieved the desired end without the always repugnant recourse to force majeure.

HEALTH EDUCATION

The Council give financial support to the Central Council for Health Education and take full advantage of the posters, pamphlets and booklets which such membership brings. The major event of the year in this sphere was a Dental Health Exhibition and Publicity Drive. Mr. B. Parson, L.D.S. School Dental Surgeon reports of this:-

"In the period September 16th - 27th a thorough Dental Health Campaign was held in Stamford and Bourne for the first time.

The aim of this campaign was to attempt to educate the children of Stamford and Bourne Schools in the value and principles of maintaining good oral hygiene.

A Nationwide statistical analysis shows that in this 20th century the state of the Nation's Teeth is rather poor despite the increase in the communication media's use of the "gleaming smile".

For most people, dental consciousness extends no further than the smile, as a result of which the state of back teeth is rather neglected. 'What the eye does not see.....'

Statistics show that at five years of age, eight out of every ten children has some degree of decay, and this increases with each year of age, obviously this trend must be reduced, and this can only be done by conducting campaigns of this sort.

The Dental Health Campaign took the form of an exhibition both static and mobile depending on the position of the School.

The exhibition covered four main aspects:

- (1) Diet as a preventive measure.
- (2) Use of fresh fruit as a cleansing medium.
- (3) Mechanical cleaning in tooth brushes.
- (4) Regular dental visits.

Examples of the advisable foods and fruit were shown alongside the examples of inadvisable foods.

Correct methods of toothbrushing were shown and demonstrations with the electric tooth brushes were made.

The reasons for regular routine dental checks were graphically illustrated with models showing the process of decay and its effect upon the living tooth.

Types of filling, orthodontic appliances (braces) etc. were shown, and children were asked to give their ideas of how decay develops etc.

A series of films were shown to each class before its visit to the Exhibition and questions were asked on what children had learned from the films.

For the young children, there were two very entertaining and instructive cartoons and for older children there were films showing the difference between primitive diet and the decay producing diet of the civilised world.

These older children were shown in more detail the process of dental decay and just how simply it may be treated by the dentist, and kept to a minimum by regular cleansing.

The campaign was helped very greatly by many firms producing Nuts, Crisps, Toothpaste, Electric toothbrushes and ordinary toothbrushes. These firms gave liberal supplies of free samples. The Apple and Pear Council also supplied sufficient apples to provide each child with one.

Campaigns of this sort must be repeated at three year intervals so that children who were not at School at the time of the previous campaign can be reached, and so that those who attended this campaign may be reminded of the dangers of decay, for in three years time they will surely need to be reminded.

Approximately 3,500 children attended the campaign during the two weeks that it was held."

Would that the Fluoridation of the Water Supplies was a realisable weapon in the fight to combat dental caries in support of dental health campaigns such as this.

MISCELLANY

As is customary there were demands on the Health Department for assistance in solving problems of a Socio-Medical nature. These arise in many different ways and in aspects to which the multifaceted services of the Welfare State do not have the complete answer. Loneliness is just one such problem. This state of being solitary, being companionless, being isolated from the Society in which the individual is living is all too common. For the elderly spinster it is often a slowly and insidiously developed state about which little may be really appreciated, until a member of the Medical or Social Service team is called in to do something energetic about it. So often this is too late to rescue the individual from the muddle into which she has got both her domestic affairs and herself. At best the Welfare and Home Help Service can achieve only a holding operation.

During the year there were two such lonely solitary individuals who required all the available resources to help them out of their morass of self-neglect and they will require support and encouragement indefinitely.

Apart from this type of slow social disintegration there is the sudden crisis produced by bereavement when after a lifetime of marriage, death breaks up the partnership leaving the spouse lost, lonely, hurt and sometimes without any real desire to carry on with a life which somehow has lost all its savour and meaning. Such a time is particularly difficult and hazardous with its admixture of economic, social, emotional and health problems, for the mortality of the survivors in such cases is high. It ought to be one of the great virtues of civilised man to take special care of the bereaved but the materialistic attitudes of the mid Twentieth Century seem to have deadened this concern which was so much part of the folk lore of so many cultures and countries in former times. The impersonality of large towns compared with the smaller and more closely integrated communities of previous eras also play a part in this lack of concern. It must be realised too, that twenty per cent at the time of their bereavement have no living children, so they cannot turn to them for help. Surely more could be done to help widows and widowers over their months and even years of readjustment, whilst they pick up once again the tangled skein of their lives? Compassion not legislation must provide the answer.

Accidental Poisoning in the home has become increasingly prevalent due doubtless to the new potent and sophisticated drugs in current use. Many of these appear in very attractive colourings and must look highly desirable to young children. Prescription charges leading to the prescribing of relatively large numbers at a time and so building up an assortment over a period in many a home, also increases the risk inherent in the situation.

In 1968 there were over 1,500 home accident deaths in England and Wales, due to poisoning but fortunately the great majority of cases of poisoning all survived in the Hospital Intensive Care Units.

Accidental poisoning in the home may be largely avoided by observing some simple rules. They are worth observing and keeping.

Keep Medicines in a locked cupboard out of the reach of children.

After Using Medicines, always return them to the locked cupboard - never leave them on view in drawers, on tables, bedside lockers, etc.

Read the Label each time you give or take a dose of medicine - and always do this in a good light.

Avoid taking medicines in front of very young children.

Always call medicines by their proper name and never refer to them as sweets.

Do not hoard prescribed medicines after the patient has recovered. Clear out the medicine cupboard frequently.

Discarded medicines, poisons, etc. should be flushed down the lavatory. The container should be rinsed clean before throwing it into the waste bin.

Parents with very young children should make it a practise to check their homes daily for poisoning hazards.

Never place poisons in cups or incorrectly labelled containers usually associated with food or drink.

Do not store detergents, polishes, bleach, petroleum products, etc. under the kitchen sink, in unlocked cupboards at floor level or on the garage floor.

Never leave traces of poisons spilt on the floor.

The Meals on Wheels Scheme run by the W.R.V.S. of Bourne under the guidance of their Centre Secretary and Supervisor, Mrs. Webb and Mrs. A. Wherry respectively, have increased their Service to the Community still further. Throughout the year meals were delivered to the homes, on average, of twenty five elderly persons twice a week. This was five more than the previous year, including one at Twenty. The total meals provided however at one thousand six hundred and eighty, were down by two hundred and sixty six in 1967. A rota of twelve drivers and assistants carry on the deeply appreciated humanitarian work. During term time the meals are drawn from the Central School Kitchen and during the school holidays Mrs. Smith of the Hereward Cafe has kindly continued the good deed of ensuring that those now so dependent on this meal and a cheerful visit are not deprived of them. In addition, two other recipients, resident in Dyke have their meals delivered from the Morton Centre.

A great new Voluntary Social Service project commenced this year through the initiative of Mrs. Hibbitt and her band of Helpers. This was the opening of the Voluntary Laundry to assist the relatives of the elderly incontinent patient and those in genuine need of such help for social or medical reasons. The Laundry, open each day, is staffed by a rota of twenty four ladies and from its inception on November 4th over two hundred sheets, an average of six or seven a day, besides pyjamas and nightdresses have been laundered and returned. They have a small float of sheets but could do with more and deserve the support of the Community in this most philanthropic venture.

The newly reprinted synopsis of Services Available to the Elderly in this area have been distributed along the same lines as in former years and thanks for his co-operation are due to the Manager of the local offices of the Ministry of Social Security at Stamford.

The South Area Welfare of Children at Risk and the South Area Welfare of the Elderly Committees met regularly each at three month intervals throughout the year. The composition of these covers representative of all the Statutory Services working in the respective fields of Child Care and Care of the Elderly. Since their inception seven years ago they have provided an invaluable forum for the exchange of information in difficult cases, reducing unnecessary visits, avoiding overlapping of visitors and generally canalising help as expeditiously as possible. If such Committees in other areas met and functioned in this same spirit of co-operation and with the same success as these, then many of the criticisms and recommendations made recently by the Seeborn Committee would have been irrelevant or unnecessary.

It was hoped that by now the Health Centre for Bourne would have been started as it has been agreed for several years. When it becomes a reality it will be a great asset to the town and permit an even closer integration between the Family Doctors and the Local Health Authority Services, which is highly desirable.

The National Health Services and the structure of the Welfare States have Come of Age. It is salutary to look back over the years and assess the triumphs which have been achieved by making full Medical Services freely available to all and greatly expanding them likewise and by abolishing the grim Spectre of Want in adversity.

It is natural however, that such Services which are vastly expensive should be reviewed from time to time and that any Sacred Cows which are no longer yielding the milk of relevance to the present and the Curd of efficient Service should be pole-axed.

It would appear when the various Bodies who are reporting or are about to do so on the organisation and functioning of the National Health Services, the Social Services and the Local Authority Services that many and fundamental changes will be made which will affect us all. It is essential that everyone be fully acquainted with these Reports and the proposed action upon

then for the outcome will ultimately play a vital part in shaping and moulding our Society and Services for many years ahead, and in time affect every individual personally.

The writer would hope to see an increasing integration of the three branches of the Health Service going hand in hand with the most effective and most economical possible use of the all too scarce medical, nursing and allied Social Service man and woman power; with a ruthless avoidance of overlapping Services wherever they occur. The possibility of some Local Authority Medical personnel taking a more active part in clinical medicine through joint appointments might be explored with advantage.

That everyone is not satisfied with the present National Health Service as it affects them personally is borne out by the fact that two million are covered by Private Patient Plans is quite apart from those who pay directly for private treatment.

In this sophisticated, materialistic and permissive Society, without the support of the old moral codes and a Living Faith, Youth are in Revolt. This is the product of their underlying lack of security, the feelings that the individual counts for little married to feelings of personal inadequacy. It finds its expression in Marches, Demonstrations and all the paraphernalia of Protest. The same ingredients play a vital role in the alarming increase in drug taking as a means of escape.

Youth deserve the fullest sympathy and understanding in their groping after a new Code of behaviour and stability.

The Permissives have advanced their Kingdom a stage further than last year and the Abortion Act is now law. Abortions have jumped from a rate of about six thousand a year to over thirty five thousand.

Venereal diseases are nearly as common as measles.

Homosexuals have come into their own.

Crime figures are up in Lincolnshire by thirteen per cent this year.

Attempted Suicide has increased.

Divorces last year went up to over fifty one thousand and when the new Divorce Bill becomes Law the anchors of matrimony will be jettisoned.

The lure of something for nothing coupled with high taxation has made this the greatest Gambling Nation on Earth.

It is not a pretty picture; but if not fully realised the permissives will win the final victory.

Bourne, in its peaceful setting and having a history stretching back over a thousand years with its own traditions and principles is mercifully spared the worst of these trends. Happily placed are those who can live and work in it and enjoy the stability so many are missing.

The Council, for their part, have spared no effort to make the town an even more progressive and healthy Community. Its friendliness and its cleanliness are alike well known and deserve applauding; and its children never were physically healthier.

The new accommodation for the Health Department was under construction at the end of this year, and this report is being written in the completed project and under impeccable conditions, for which I would like to express my gratitude.

In drawing my report to a close, I want to thank the Chairman and Members of the Health Committee for their unwavering support and encouragement. I wish to record my appreciation of Mr. Thompson's full co-operation throughout the year and also to thank Mr. Mason for his ready help and Mr. Silverwood for his wholehearted assistance and all my other colleagues on the staff for their cheerful co-operation at all times.

I acknowledge gratefully the part played by Miss Christine Laxton in her secretarial role, culminating in the production of this review. May her stay with us be a long and happy one.

Finally, I wish to thank Dr. C. W. Sweetnam for so kindly standing in for me whilst I have been away.

H. ELLIS SMITH

Medical Officer of Health.

ANNUAL REPORT OF THE PUBLIC HEALTH INSPECTOR

for the year 1968

To the Chairman and Members of the
Urban District of Bourne.

Mr. Chairman, Ladies & Gentlemen,

I have pleasure in presenting my third Annual Report concerning the work of the department during 1968.

PART I - HOUSING

The slum clearance problem in Bourne is virtually non-existent, although the individual unfit house must occasionally fall into that category due to natural decay and the increase in one's standards. It was found necessary to use the Council's statutory powers only twice during the year. In one case - 24 St. Peter's Road, it was necessary to impose a Demolition Order on the property; and in the other, a notice under Section 9 of the Housing Act 1957 had to be served to compel a house owner to carry out repairs necessary to render the house fit for habitation.

Erection of New Dwellings

For the second successive year no Local Authority houses were completed, nor were there any under construction.

The private residential estates continue to expand; and the latter part of 1968 saw the beginning of the residential development to the North of Mill Drove.

In the private sector, 45 houses were completed during the year; 5 fewer than in 1967 and 35 were under construction at the end of the year.

Improvement Grants

The details of Standard and Discretionary Improvement Grants are set out in appendix B of this report.

It is pleasing to record an increase in the number of applications for Standard Grant payments during the year; although there are still many houses in the town which are basically

sound but which lack modern amenities such as bathrooms, hot water supplies, etc. and would benefit the occupiers of these properties considerably if greater advantage were taken of the grant facilities which are available.

The new Housing Bill, which relaxes certain of the conditions applied to grants and raises quite considerably the maximum permitted grants, is still not on the Statute book. It is hoped that as soon as this occurs more owners of property will be tempted to take advantage of the Grant provisions and enable the Authority to do more in improving the standard of dwelling houses in the district.

Moveable Dwellings

There are two licenced caravan sites in the Urban District, containing two and one caravans respectively. They have both been inspected and are in a satisfactory condition, with all necessary facilities provided.

The Site Licences expire in June, 1969 and in March, 1970.

As in previous years, 1968 saw the frequent appearance of 'travellers' on lay-byes and verges in the district. Without exception they stayed only for a few days before moving on. A problem caused by these people is that they invariably leave in their wake a certain amount of litter causing problems of clearance and rodent infestation of contiguous dykes. I fear that this problem will be with us until such time as properly equipped sites are provided for these itinerant travellers.

PART II - FOOD INSPECTION AND HYGIENE

(a) Slaughterhouses and Meat Inspection

There are two licenced slaughterhouses in the Urban District; both of which are owned by Messrs. T. W. Mays & Sons Ltd., Eastgate.

(i) Eastgate Abattoir

Eastgate Abattoir is the principal slaughterhouse for Bourne and the surrounding area. With a further reduction in throughput during the year, it is working well below capacity and is at present run with a staff of only two.

No major alterations were carried out during the year and the premises continue to be

hygienically operated.

(ii) Klondyke Abattoir

This small abattoir, situated off West Road caters exclusively for the slaughter of horses for export to Belgium, and for the slaughter of casualty stock from farms in the district, which have a chance of being salvaged for human consumption. Although this abattoir complies with English legislation governing slaughterhouses, it falls short of the standards required by the Common Market Community for export abattoirs; and must be considered to have a limited life as a horse slaughtering centre until such time as Belgium fully enforce the E.E.C. standards.

As mentioned previously however, the abattoir complies with domestic legislation and with the very sporadic throughput, is easy to operate hygienically.

There are no poultry processing establishments in the district.

The statistics covering slaughtering, meat inspection and the amount of meat surrendered as unfit are set out in appendices C, D and E.

It will be seen from appendix C that although 120 more cattle were slaughtered, there was a considerable reduction in the number of pigs and sheep slaughtered, resulting in an overall decrease in the throughput of the abattoir. Meat Inspection charges for the year totalled £325. 16. 9. Resulting in the reduction in throughput, 100% inspection of meat for human consumption has been easily maintained with only a minimal amount of overtime being necessary.

The quality of stock slaughtered has again been maintained at a high level during the year, with very little serious disease being encountered. No cases of cysticercus bovis were encountered and the once prevalent bovine tuberculosis is now practically extinct and is very rarely encountered in abattoirs. However, one still sees fairly frequently, the avian type of T.B. in pigs. This type of T.B. is much less serious as it is not communicable to man and is generally only found in local lesions of the carcass. Of the 11 pig carcasses condemned during the year, 9 were for systemic pyaemic infection caused by tail-biting. This condition causes a high loss of valuable food and is prevalent throughout the country. It is a problem which has accompanied the expansion of intensive rearing of pigs under 'factory' conditions and the two are directly associated. The primary cause of tail-biting is obscure but evidence strongly suggests that it is due to the lack of exercise and boredom of closely confined pigs. No-one seems to know an answer to this problem and I feel that it will be with us for some considerable time.

I would like at this point to record my appreciation to Mr. J. M. Gilmour, Veterinary Officer of the Ministry of Agriculture, Fisheries and Food for his congenial help and advice

during his visits and inspections.

(b) Food and Drugs Act 1955

(i) Knacker Yard, The Slipe.

The knackeryard, owned and occupied by Messrs. T. W. Mays & Sons Ltd. was licenced for a further twelve months. Regular inspections have been made and the premises have been maintained and operated in a satisfactory manner.

(ii) Milk Supplies - Milk (Special Designation) Regulations 1963

Milk was supplied throughout the district by the following retailers:-

M. Bradshaw - supplied by Pinchbeck Dairies Ltd.

J. R. Chapman, Billingborough - own herd's farm bottled milk and pasteurised milk supplied by Pinchbeck Dairies Ltd.

D. & G. Clarey, West Road - supplied by Pinchbeck Dairies Ltd.

Peterborough & District Co-operative Society Ltd. - own dairies.

H. Moisey & Sons, Meadowgate - Pasteurised - supplied by M. Bradshaw.

Thirteen samples of milk were submitted to the Public Health Laboratory by Bourne Urban District Council for statutory and biological examination and twelve were submitted by Kesteven County Council.

The table in appendix F gives details of the results of these examinations.

Two samples of raw milk gave unsatisfactory results; one was a positive milk ring test for brucellosis and another showed a positive guinea pig inoculation test also for brucellosis. However, as both of these milk samples were produced outside this district, the necessary information was passed to the relevant authority for any action they considered necessary.

(iii) Bacteriological Ice Cream Samples

Twenty six samples of ice cream were submitted to the Public Health Laboratory for bacteriological examination.

The table in appendix G gives the details of the results of the examination.

(iv) Food Hygiene (General) Regulations 1960

The following are details of premises in the Urban District to which the above Regulations apply.

Trade carried on	No. of Premises	No. with washbasins	No. requiring facilities for washing food and equipment	No. with facilities for washing food and equipment
Sweets and Confectionery	6	6	4	4
Bakehouses	1	1	1	1
Butchers	7	7	7	7
Grocers and General	19	19	19	19
Greengrocers	6	6	6	6
Wet fish shops	1	1	1	1
Fried fish shops	2	2	2	2
Cafes and Restaurants	6	6	6	6
Food Warehouses	2	2	2	2
Registered Clubs	5	5	5	5
Licensed Premises	14	14	14	14
School Canteens	3	3	3	3
Stalls and Mobile Shops	14	14	4	4

The following defects were notified to occupiers:-

Lack of wash-hand notices in toilets	6
Unsatisfactory sanitary accommodation (inc. repair, decoration, lighting and ventilation)	3
Unsatisfactory decoration of food rooms	2
Exposure of food to risk of contamination	5
Lack of washing facilities to stalls, etc.	5
Lack of name and address on stalls, etc.	7

(v) Registrations

- (a) Manufacture of sausages and preserved food - 7
- (b) Sale and storage for sale of ice cream - 25

(vi) Watercress Beds

There are two commercial watercress beds in the Urban District; they are situated at:-

- (a) Well Head, Bourne - Operated by the South Lincs. Water Board.
- (b) South Road, Bourne - Operated by Hereward Watercress Ltd.

No changes were effected during the year, and both are operated in a satisfactory manner.

(vii) The Food Hygiene (Markets, Stalls and Delivery Vehicles) Regulations 1966

There are about eight market stalls and six mobile shops, etc. in the Urban District, to which the above regulations apply.

Most of the defects found on inspections during the year were of a minor nature. The principal problem to be overcome is stallholders forgetting to put their name and address on the stall when setting out. The only way this can be overcome is by weekly inspections and constant reminders to the stallholders of their statutory obligations under the regulations.

Of the six mobile shops operating from within the district, four are butcher's vans, one is a greengrocer and one is a mobile fish and chip van. No serious contraventions were recorded and in general, operators were co-operative and anxious to correctly equip their vehicles in accordance with the regulations.

PART III Environmental Health

(a) Water Supplies

Mains water is supplied throughout the district by the South Lincolnshire Water Board, although 26 premises are served by private boreholes. The Water Board take regular bacteriological samples from the pumping station and from various distribution points around the town. During the year 68 samples were taken, of which 4 showed evidence of organic pollution. All these four samples were from the pumping station.

There were 44 water samples submitted to the Public Health Laboratory by the Bourne Urban District Council during the year. These were taken from a total of ten private bores.

Unsatisfactory sample results emanated from two of the bores. In one case more effective sealing of the bore head and repair work to the header tank reduced the contamination and the supply is now satisfactory. In the other case, the low contamination figures probably resulted

in an abnormally high subsoil water level and subsequent samples have since proved to be satisfactory.

Detailed results of samples from private bores are set out in appendix H.

So far as is known, only 10 houses are supplied from standpipes, 5 of which are unoccupied. The population affected is 14 out of a total estimated population of 5,790.

(b) Swinning Pool, Abbey Road, Bourne

This pool, owned and operated by the Bourne United Charities, continued to operate during the Summer months of 1968.

No major alterations were carried out to the pool during the year, although it soon became obvious that the base of the pool was cracked and leaking; and in fact extensive repair work has been carried out during the early part of 1969.

Extensive sampling was again carried out during the year with a total of 26 samples being taken. At each visit at least 3 samples were taken, one from the paddling pool and one each from the inlet and outlet to the main pool.

Appendix I tabulates the results of these samples.

It is pleasing to report that at no time during the season was there any indication of the presence of coliform bacilli and in general, the plate counts were also excellent. The very high plate count for the sample taken on the 1st May was due to the fact that all the water in the pool had not circulated through the filtering and chlorination apparatus, and indeed is an indication of the efficiency of the plant, as the sample taken at the same time from the pool inlet showed an extremely low level of pollution. These samples were in fact taken before the pool was opened to the public and all subsequent samples showed an extremely high standard. Of the 26 samples submitted to the Laboratory; 25 showed a plate count of less than 10 - a percentage of 96% - against the Standard laid down of 75%.

These results in themselves pay great tribute to the excellent management of the pool and the concern felt in protecting the bathing public from the risk of disease.

(c) Public Health Laboratory Service

The Council have again been fortunate in having the facilities of the Public Health

Laboratory at the Peterborough & District Memorial Hospital available for pathological, bacteriological and biological examination of samples. I would like at this point, to record my appreciation to Dr. Glencross and his staff for their continued valuable help and advice during the year.

(d) Public Cleansing

(i) Refuse Collection

The Refuse collection service is carried out by means of one specialized vehicle. The service ran comparatively smoothly during the year but one must be mindful of the ever increasing amount of work required of the vehicle and crew to maintain a weekly collection service.

Since the beginning of 1967, ninety five new houses have been built in the district, meaning an extra ninety five bins per week requiring emptying. This problem is accentuated at holiday times and during periods of bad weather, when it is necessary to press the Council's lorry into service to help clear up the backlog of collection.

(ii) Refuse Disposal

The tipping of refuse continues in the old railway cutting off West Road. During the year, the Council reached agreement with the respective land-owner to continue tipping beyond the railway bridge up to the tunnel entrance.

The Council are extremely fortunate in having adequate tipping space so near to the town; but it will not last indefinitely and one must always look well into the future needs of the town in deciding future refuse disposal needs.

The refuse tip itself caused few problems during the year. Regular inspection and treatment kept rats down to a minimum and there was relatively little nuisance caused by flies. The largest problem at the tip is that of fire. During the dry part of the year, the tip was covered in a pall of smoke, making working conditions unpleasant for the refuse collectors.

Street gully cleansing, carried out under contract, was done twice during the year.

(d) General Sanitation

General complaints totalled 64 during the year. All were investigated and the majority were dealt with informally, although it was necessary to serve statutory notices on two occasions.

The vast majority of the complaints were of a straightforward nature, ranging from housing defects and drainage problems to complaints of smell and smoke nuisance.

One or two complaints were received during the summer months regarding smells emanating from piggeries, invariably this was caused by a building up of manure in the open air. Informal representation to the occupiers resulted in the expeditious removal of this offensive material.

It was found necessary to use the Council's statutory powers once during the year, where a notice under Section 93 of the Public Health Act 1936 was served on an owner to fill in a stagnant pool which was giving rise to complaints of smell.

(f) Public Conveniences

Two blocks of Public Conveniences are provided by the Council - in South Street near the Market Place and on the Recreation Ground.

As in previous years, virtually no problems occurred, arising from vandalism.

(g) Prevention of Damage by Pests Act 1949

Work under the above Act has proceeded satisfactorily during the year in the capable hands of the Council's Rodent Operator, Mr. A. E. Baker.

There was a total of 107 complaints of rat and mouse infestation notified to the department during the year, 65 fewer than in 1967. In addition, there were 21 complaints of wasps nests, beetles, moles, etc.

It is pleasing to report that it was possible to commence treatment of these complaints within a few days of notification and so do much to prevent the spread of infestation.

In addition to the treatment of notified infestations, regular survey of the area resulted in the finding of quite large colonies of rats in places where they were not readily noticeable. As in previous years, treatment of stacks in the district was carried out on a contract basis with local farmers.

Although some persistently recurring colonies of rats were evident during the year and the winter months were particularly busy, at no time was the Rodent Operator unable to carry out his work diligently due to excessive demands being made on him.

I would like to reiterate the fact that rodent control is a free service to householders and the charges for treatment made to occupiers of farms, businesses, etc. is very reasonable.

In addition the Council can offer supplies of cheap poison for persons wishing to carry out their own treatment.

(h) Clean Air Act 1956

(i) Domestic Smoke

In a principally rural area such as this, with little high density housing and an open aspect there are few problems caused by domestic smoke pollution; therefore no action was taken to declare Smoke Control Areas. Many householders are now realising the advantages of control heating and the use of smokeless fuels is increasing, so playing their part in reducing atmospheric pollution.

It is pleasing to note that the Council, in their improvement schemes are taking the lead in this field by installing gas central heating in council houses.

(ii) Industrial Smoke

Regular observations were kept on industrial plants in the area and it is pleasing to record that very few contraventions of the Dark Smoke (Permitted Periods) Regulations 1956 were recorded. Where contraventions were recorded, the fact was brought to the notice of the occupiers and remedial work done.

(i) Factories Act 1961

The table set out in Appendix L gives details of the implementation of this legislation during 1968.

(j) Offices, Shops and Railways Premises Act 1963

The table in Appendix J shows details of the implementation of this legislation during 1968.

During 1967 and the early part of 1968 all premises subject to the Act were inspected and defects found were notified to occupiers, and the majority of them are now in a satisfactory condition; therefore fewer inspections were necessary during 1968. However, it is hoped to carry out an inspection of all registered premises again during 1969.

No accidents were notified during the year, nor was it necessary to resort to legal proceedings in order to enforce the Act.

(k) Agriculture (Safety, Health and Welfare) Act 1956

Inspections made for purpose of Act	15
Unsatisfactory sanitary accommodation	0
Number of premises subject to Act	61

(1) Petroleum (Regulation) Act 1928-1936

Thirty one premises were licensed early in 1968 for the storage of petroleum spirit. A total of 33,900 gallons were stored under licence and the fees totalled £22. 5s. 0d.

In September of 1968, an inspection of all licenced premises was made by myself and an officer of the Kesteven Fire Brigade. It is pleasing to record that all defects were of a minor nature and easily remedied.

(m) Pet Animals Act 1963

Two pet shops were licenced for a further twelve month period. Both were well maintained.

Conclusion

In bringing my report to a close, I would like to acknowledge the invaluable help and advice I have received from Dr. H. Ellis Smith, Mr. M. Silverwood and his Staff and Mr. F. Mason and his Staff. I would also like to record my appreciation for the consideration shown to me by the Chairman of the Public Health Committee and by the Chairman and Members of the Council.

A. THOMPSON

Public Health Inspector.

APPENDIX A

HOUSES	IN CLEARANCE AREAS	Number of houses represented	-
		Number of houses demolished	-
		Persons displaced	-
		Families displaced	-
DEMOLISHED	NOT IN CLEARANCE AREAS	Number of houses represented	-
		Number of houses demolished	2
		Persons displaced	3
		Families displaced	1
UNFIT HOUSES CLOSED	-	Number of houses	-
		Persons displaced	-
		Families displaced	-
UNFIT HOUSES MADE FIT		After informal action by Local Authority	5
		After formal notice by Public Health Act:-	
		by owner	-
		by Local Authority	-
		After formal notice Housing Act:-	
		by owner	1
		by Local Authority	-

APPENDIX B

IMPROVEMENT GRANTS

(1) Standard Grants

1. Number of applications	(a) Owner/Occupiers 6 Approved 6 Refused -
	(b) Tenanted houses - Approved - Refused -
2. Number of dwellings improved	(a) Owner/Occupiers 6 (b) Tenanted -
3. Amount paid in grants	£818. 0s. 0d.
4. Average grant per house	£139. 6s. 8d.
5. Amenities provided:-	
	(a) Fixed bath 4
	(b) Shower -
	(c) Wash-hand basin 4
	(d) Hot water supply (to any fittings) 8
	(e) Watercloset (1) within the dwelling 6
	(2) accessible from the dwelling -
	(f) Food store 1

(2) Discretionary Grants

1. Number of applications approved	6
2. Number of applications refused	-
3. Amount paid in grants	£2,191. 10s. 0d.
4. Number of dwellings improved:-	
(a) Owner/Occupier	7
(b) Tenanted	-

APPENDIX C

Details of slaughtering over last three years:-

Year	Horses	Cattle	Cows	Calves	Sheep	Pigs	Total	No. of visits
1966	74	982	57	5	3,307	4,963	9,388	573
1967	54	804	40	16	3,334	3,764	8,012	531
1968	53	923	38	11	2,856	3,394	7,275	526

Whole and Part Carcasses Condemned

The following table shows the different species of animals and the number of whole carcasses or parts condemned for tuberculosis, cysticercosis and other diseases:-

	Calves	Cattle excluding Cows	Cows	Sheep and Lambs	Pigs	Horses			
Number killed	11	923	38	2856	3394	53	-	-	-
Number not inspected	-	-	-	-	-	-	-	-	-
All diseases except Tuberculosis:									
(a) whole carcasses condemned	1	5	12	10	11	1	-	-	-
(b) Carcasses of which some part or organ was condemned	5	94	14	42	143	2	-	-	-
Percentage of number examined affected with disease other than Tuberculosis	54.5	10.7	68.5	1.83	4.5	3.7	-	-	-
Tuberculosis									
(a) Whole carcasses condemned	-	-	-	-	-	-	-	-	-
(b) Carcasses of which some part or organ was condemned	-	-	-	-	42	-	-	-	-
Percentage of number affected with Tuberculosis	-	-	-	-	1.2	-	-	-	-
Cysticercosis									
Carcass of which some part of organ was condemned	-	-	-	-	-	-	-	-	-
Carcasses submitted to treatment by refrigeration	-	-	-	-	-	-	-	-	-
Carcasses destroyed	-	-	-	-	-	-	-	-	-

APPENDIX E

Details of Unfit Meat Surrendered at Slaughterhouses

(a) Carcasses and Part Carcasses

1 Horse Carcase and Offals	-	Melanoma
1 Side Horse Carcase	-	Bruising
1 Horse Hind Leg	-	Trauma
1 Beast Carcase and Offals	-	Severe Bruising
1 Beast Carcase and Offals	-	Oedema
1 Beast Carcase and Offals	-	Septicaemia
1 Beast Carcase and Offals	-	Jaundice
1 Beast Carcase and Offals	-	Blackquarter
4 Beast Hindquarters	-	Bruising
1 Beast Forequarter	-	Abscess
6 Cow Carcasses and Offals	-	Oedema
4 Cow Carcasses and Offals	-	Fevered
1 Cow Carcase and Offals	-	Septic Peritonitis
1 Cow Carcase and Offals	-	Severe Bruising
2 Cow Hindquarters	-	Bruising
1 Cow Hind Leg	-	Arthritis
1 Cow Forequarter and Loins	-	Bruising
9 Pig Carcasses and Offals	-	Tailbite Pyaemia
1 Pig Carcase and Offals	-	Fevered
1 Sow Carcase and Offals	-	Abnormal Odour
2 Pig Forequarters	-	Abscesses
6 Pig Hindlegs	-	Abscesses
2 Pig Loins	-	Abscesses
4 Pig Hindquarters	-	Trauma
5 Sheep Carcasses and Offals	-	Oedema and Emaciation
2 Sheep Carcasses and Offals	-	Septicaemia
2 Sheep Carcasses and Offals	-	Extensive Bruising
1 Sheep Carcase and Offals	-	Moribund
1 Sheep Hind Leg	-	Bruising
1 Sheep Shoulder	-	Abscesses
1 Calf Carcase and Offals	-	Acute Septic Pneumonia
1 Calf Hind Leg	-	Trauma

APPENDIX E (cont)

(b) Other Organs

3 Beast Heads and Tongues	1	Abscesses
2 Beast Heads and Tongues	-	Actinobacillosis
39 Beast Livers	-	Abscesses
29 Beast Livers	-	Fascioliasis
2 Beast Livers	-	Peritonitis
1 Beast Liver	-	Telengiactesis
1 Beast Liver	-	Fatty degeneration
3 Pair Beast Lungs	-	Lungworm
2 Pair Beast Lungs	-	Pneumonia
1 Pair Beast Lungs	-	Abscesses
1 Beast Heart and Lungs	-	Traumatic Pericarditis
2 Beast Hearts	-	Degenerate Cysts
1 Beast Heart	-	Pericarditis
2 Beast Kidneys	-	Necrosis
2 Cow Livers	-	Fatty Degeneration
2 Cow Livers	-	Telengiactesis
1 Cow Liver	-	Abscesses
1 Cow Liver	-	Cirrhosis
1 Cow Liver	-	Peritonitis
3 Pairs Cow Lungs	-	Emphysema
2 Pairs Calf Lungs	-	Pneumonia
1 Calf Heart and Lungs	-	Emphysema
1 Calf Liver	-	Fatty Infiltration
12 Pig Shanks	-	Arthritis
45 Pig Livers	-	Ascaris
1 Pig Liver	-	Peritonitis
17 Pig Plucks	-	Pleurisy and Peritonitis
5 Pig Plucks	-	Pneumonia and Peritonitis
1 Pig Heart and Lungs	-	Abscesses
42 Pig Heads	-	Tuberculosis
6 Pig Heads	-	Abscesses
30 Sheep Livers	-	Parasites
4 Sheep Livers	-	Contamination
2 Sheep Hearts and Lungs	-	Contamination
2 Sheep Hearts and Lungs	-	Pleurisy
1 Sheep Pluck	-	Abscesses
1 Sheep Head	-	Abscesses

APPENDIX F

Bacteriological and Biological Milk Samples taken in the district

By Bourne Urban District Council

Dealer	No. of Samples taken	Designation	Results
Pinchbeck Dairies	4	Pasteurised	Satisfactory
Pinchbeck Dairies	4	Untreated	3 Satisfactory 1 Guinea Pig innoculation + for Brucella Abortus
J. R. Chapman, Billingborough	1	Untreated	+ Milk ring test
Peterborough Co-op	4	Pasteurised	Satisfactory

By Kesteven County Council

Pasteurised 8 - All Satisfactory
Untreated 4 - 3 Satisfactory - 1 Failed Meth Blue Test.

APPENDIX GDetails of Samples of Ice Cream taken in the district

Producer	No. of Samples	Results
Ross Tudor Dairies - Pre-packed	7	7 - Grade 1
Walls - Loose	4	2 - Grade 1 2 - Grade 2
Walls - Pre-packed	3	1 - Grade 1 2 - Grade 2
Lyons - Pre-packed	7	4 - Grade 1 3 - Grade 2
Midland Counties	5	4 - Grade 1 1 - Grade 2

APPENDIX HDetails of Water Samples from private bores

	Coliform B.	B. Coli (i)
Klondyke Abattoir (1)	6	0
Klondyke Abattoir (1)	3	0
Klondyke Abattoir (1)	1	1
Klondyke Abattoir (1)	1	0
Klondyke Abattoir (11)	0	0
Eastgate Abattoir (12)	0	0
T. W. Mays Knackeryard (5)	0	0
8 Cawthorpe (1)	1	0
8 Cawthorpe (2)	0	0
2 The Slipe (1)	0	0
4 The Slipe (1)	0	0
Bourne Laundry (2)	0	0
Hilliam, Twenty Drove (1)	0	0
Cawthorpe House (1)	0	0
1 Tunnel Bank Road (1)	0	0
Black House, South Fen (1)	2	0

APPENDIX ISwimming Pool - 1968 Results of Bacteriological Examinations

Date	No.	Source	Coliform B	Plate Count
1.5.68	14	Paddling Pool	0	0
1.5.68	15	Inlet	0	1
1.5.68	16	Outlet	0	245
22.5.68	18	Paddling Pool	0	0
22.5.68	19	Inlet	0	7
22.5.68	20	Outlet	0	1
22.5.68	21	Outlet	0	1
5.6.68	23	Paddling Pool	0	1
5.6.68	24	Inlet	0	3
5.6.68	25	Outlet	0	1
5.6.68	26	Outlet	0	0
12.6.68	28	Paddling Pool	0	0
12.6.68	29	Inlet	0	2
12.6.68	30	Outlet	0	0
25.6.68	33	Paddling Pool	0	0
25.6.68	34	Inlet	0	0
25.6.68	35	Outlet	0	0
12.7.68	38	Paddling Pool	0	0
12.7.68	39	Inlet	0	0
12.7.68	40	Outlet	0	2
20.8.68	41	Paddling Pool	0	0
20.8.68	42	Inlet	0	0
28.8.68	43	Outlet	0	0
3.9.68	47	Paddling Pool	0	0
3.9.68	48	Inlet	0	3
3.9.68	49	Outlet	0	0

APPENDIX J

	NON- AGRICULTURAL	AGRICULTURAL
1. Number of Properties in district	2482	112
2. (a) Total number of properties including nearby premises inspected following notifications	88	15
(b) Number infestated by (i) Rats	73	14
(ii) Mice	6	5
3. (a) Total number of properties inspected for rats and/or mice for reasons other than notification	27	24
(b) Number infestated by (i) Rats	4	18
(ii) Mice	1	3

APPENDIX K

1. INSPECTIONS for the purpose of provisions as to health

Premises (1)	Number on Register (2)	Inspections (3)	Number of Written Notices (4)	Occupiers Prosecuted (5)
(i) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities	9	4	-	-
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority	53	19	1	-
(iii) Other Premises in which Section 7 is enforced by the Local Authority (excluding out-workers Premises)	8	3	-	-
TOTAL	68	26	1	-

2. Cases in which DEFECTS were found

Particulars (1)	Number of cases in which defects were found				Number of cases in which prosecutions were instituted (6)
	Found (2)	Remedied (3)	To H.M. Inspector (4)	By H.M. Inspector (5)	
Want of cleanliness (S.1)	1	1	-	-	-
Overcrowding (S.2)	-	-	-	-	-
Unreasonable temperature(S.3)	-	-	-	-	-
Inadequate ventilation (S.4)	-	-	-	-	-

APPENDIX L

TOTALS		1	99	48
TABLE A REGISTRATIONS AND GENERAL INSPECTIONS	Offices	1	30	9
	Retail Shops	-	62	32
	Wholesale Shops, Warehouses	-	2	2
	Catering Establishments open to the public	-	4	4
	Fuel Storage Depots	-	1	1
	(1) Class of Premises	(2) No. of Premises Registered during the year	(3) Total No. of Registered Premises end of year	(4) No. of Reg. Premises receiving a general inspection during the year

Number of visits of all kinds by Inspector to Registered Premises - 59

TABLE C	Class of Workplace	No. of Persons Employed
ANALYSIS OF PERSONS EMPLOYED IN REGISTERED PREMISES BY WORKPLACE	(1)	(2)
	Offices	108
	Retail Shops	241
	Wholesale Depts. Warehouses	20
	Catering Establishments open to the public	23
	Canteens	1
	Fuel Storage Depots	3
	Total	396
	Total Males	160
	Total Females	236

APPENDIX L (cont.)

TABLE D - EXEMPTIONS

Part I	-	Space (Section 5) (2)	-	Nil
Part II	-	Temperature (Section 6)	-	Nil
Part III	-	Sanitary Conveniences (Section 9)	-	1 (Retail Shop)
Part IV	-	Washing Facilities (Section 10)	-	1 (Retail Shop)

TABLE E - PROSECUTIONS

Nil

TABLE F - INSPECTORS

Number of inspectors appointed under Section 52 (1) or (5) of the Act	-	One
Number of other staff employed for most of their time on work in connection with the Act	-	Nil

